



NOTICE OF INTENT TO OPEN, BUY, RELOCATE, SELL OR CLOSE A SCHOOL OF BARBERING

State Form 44672 (R2 / 4-00)

State Board of Barber Examiners
Indiana Professional Licensing Agency
302 West Washington Street, Room E034
Indianapolis, IN 46204

I (we) hereby serve notice to the State Board of Barber Examiners, of intent to:

☐ **1. OPEN A NEW SCHOOL OF BARBERING**

Approximate opening date	Name of school of barbering
Location (<i>number and street, city, state, ZIP code</i>)	
Telephone number	

☐ **2. BUY AN EXISTING SCHOOL OF BARBERING**

Approximate opening date	Name of school of barbering
Location (<i>number and street, city, state, ZIP code</i>)	
Telephone number	
Will location of school change? <input type="checkbox"/> Yes <input type="checkbox"/> No	If Yes, new location of existing school of barbering? (<i>number and street, city, state, ZIP code</i>)

☐ **3. RELOCATE AN EXISTING SCHOOL OF BARBERING**

Approximate opening date	Name of school of barbering
Current location (<i>number and street, city, state, ZIP code</i>)	
New location (<i>number and street, city, state, ZIP code</i>)	
Telephone number	

☐ **4. SELL AN EXISTING SCHOOL OF BARBERING**

Approximate opening date	Name of school of barbering
Current location (<i>number and street, city, state, ZIP code</i>)	
Name of purchaser	
Address of purchaser (<i>number and street, city, state, ZIP code</i>)	
Telephone number	

☐ **5. CLOSE AN EXISTING SCHOOL OF BARBERING**

Approximate closing date	Name of school of barbering
Location (<i>number and street, city, state, ZIP code</i>)	
Telephone number	

Dated this _____ day of _____, _____.

Signature of owner / partner / corporate officer

Printed name of owner / partner / corporate officer